APPENDIX D

CRIGINAL
Date of inspection Mayon 23/98 Time start 11:40 and Time finish 1:30 p.
Name of inspector Thomas Showman, James Young
Company, installation name Philip's FCG INC,
Location 3101 Pleasant Palley Blug.
County BLAIR Municipality city of ALtoons
Identification number PADCOH 374955
Name of responsible official Mr. Robert Isacki
Title Plant Manager
Mailing address Same
Area code and phone no. 914-943-1/26
Name of person interviewed Mr. Thomas Hoppel, Mr. Lene Coltkin
Title Materials Engineer, Supervising Product Engineer,
Mailing address (if different from above) Same
Area code and phone no. Same
l. Site characterization:
a Treatment surface impoundments, chemical, physical, biologic
b. A Storage - A containers, A tanks, A surface impoundments, A waste piles
c.   Disposal -   land treatment,   landfill,   incineration,   thermal tre
d. 🛮 Use, 🖂 reuse, 🖂 recycle, 🖾 reclaim
. Does the facility generate hazardous wastes? / Yes / No
Types of hazardous waste produced by Hazardous Waste Number:  FOO!  DOO5  FOO5
. Are hazardous wastes transported off-site by the facility? 🖂 Yes 🛭 No

1- HON-COMPLIANCE, Z-COMPLIANCE, 3-NOT APPLICABLE, Y-NOT DETE: NED DRIGINAL				
COMP	TUS		REQUIREMENT	CHAPTER CITATION 75.265
1 /			Part A permit application submitted	(a) (2), (z
1/			Identification number .	(p).
		X	Wastes accepted at facility transported by haulers licensed to transport hazardous waste by the Department	(b)(l)
	X		Waste streams not covered by permit approved by the Department before accept	ance (c)
, X			Chemical and physical analyses repeated as required	(c)(l)
·X			All waste shipments inspected and sampled	(c) (2)
1		X	Waste analysis plan on-site	(¢)(3)
X			24 hr. surveillance at active portion .	(d) (2)
1 7			Artificial barrier at active portion	(d) (2)
1	X		Proper signs posted and legible at a distance of at least 25 ft.	(d) (3)
X			Inspection schedule on-site	(e) (2)
IX			Maintenance schedule on-site for equipment or structures which reveal deterioration or malfunction	(e) (4)
	1.	χ	Immediate remedial action taken where a hazard is imminent or has already occurred	(e) (4)
V = 8			On the job or classroom personnel training program	(f)
X			Records retained for each employee at facility of training, job title, and job description	(f)(6)
X			Ignitable or reactive wastes separated from source of ignition or reaction	(g)(l)
· Y			No smoking signs displayed where there are hazards from ignitable or reactive wastes	(g)(l)
· V			Treatment, storage, disposal of ignitable or reactive wastes or mixing of incompatible wastes or materials conducted according to requirements	(g)'(2)
X			Facility equipped with internal alarm system capable of providing immediate emergency instruction to personnel	(h) (2)
IX			Facility equipped with a device for summoning outside emergency assistance	(h) (2)
X			Facility equipped with fire control, spill control, and decontamination equipment	(h) (2.)
X			Facility equipped with water at adequate volume and pressure to supply fire control equipment	(h) (2)
T N			Facility communications or alarm systems, fire control, spill control, and decontamination equipment tested and maintained.	(h) (3)
X			Adequate aisle space maintained to allow unobstructed movement of personnel and equipment during emergencies	(h) (6)
X			Contingency plan on-site and implemented	(i)(1)
X			Contingency plan describes action taken by personnel in the event of an emergency	(i)(3)
	•	1	Contingency plan describes arrangements agreed to for outside emergency services such as police and fire department, hospitals, contractors, etc.	157.15
Mineral & gift a wife &			the second of th	,•

- NON-COMPLIANCE, Z-COMILIANCE, B-NOT MYLLADLE, Y-NOT OBIL CHAPTER COMPLIANCE CITATIO STATUS REQUIREMENT (Red) 75.265 1121314 Contingency plan contains an up-to-date list of names, addresses and phone (i)(6)numbers of all persons qualified to act as emergency coordinator. Contingency plan contains list of emergency equipment including location, (i)(7)physical description and capabilities of each item Contingency plan contains an evacuation plan if there is a possibility 3/ (i)(8)that evacuation could be necessary One employee designated as the primary emergency coordinator either on the (i)(11)premises or on call. (j) Facility accepting only PA manifests Manifests properly completed and routed within time limits (24 hrs.) (j)(2)(Manifest discrepancies resolved or reported within time limits (j)(10)Written operating record maintained on the premises (k) Written operating record contains description and quantity of wastes and (k) (2) method of treatment, storage or disposal Written operating record contains location and quantity of each hazardous (k)(2) Written operating record contains results of waste analyses and treatability  $\{(k),(2)\}$  $(k) \cdot (2)$ Written operating record contains reports and details of all incidents (k) (2) Written operating record contains records and results of all inspections Written operating record contains required monitoring, testing, and (k)(2)analytical data (k)(2)Written operating record contains closure and post-closure cost estimates (1) All records retained on premises and available for inspection (m) Quarterly reports submitted to the Department (m)(2)Emissions, discharges, fires, explosions, and groundwater contamination reported as required (n)(2)Groundwater monitoring wells located at approved sites Adequate protection of groundwater monitoring wells (n)(7)(n) (8) Groundwater sampling and analysis plan on the premises Groundwater quality assessment and abatement outline on the premises (n) (14 (0)(2)Closure plan on the premises and up-to-date (0)(10)Post-closure plan on the premises and up-to-date (p)(2)Annual closure cost estimate on the premises and up-to-date Annual post-closure cost estimate on the premises and up-to-date (p) (5)

ace of inspection Mars 73,1481 Identi	fication number FD CO4 37.47100
ampany Installation name Philip's ECG	/nC,
County BLair Municipa	lity City of ALtoona
) Personnel training program not being met.	and records thereof are
2) Manifests not properly time Limits	completed and routed with
Time Limits	
	See go
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•	
his inspection report is official notification of Environmental Resources, Bureau of Solid Waste Ma The findings of this inspection are shown in this uring the inspection are indicated. Violations results of laboratory analyses and review of Depa coming, confirming any violations indicated here	s report. Any violations which were uncovered may also be discovered upon examination of tartment records. Notification will be forth-
nspector (signature) James J. Young / Th	Thouse 1 Date 3-23-8/

Date of inspection March > 3, 1981 Time start 10:30a, m. Time finish 11:35
Name of inspector Thomas Show Man
Company, installation name Philips ECG, Inc.
Tocation 3101 Pleasant Vailley Blud.
county BLZIR Municipality City of Altonney
Identification number PAD COH 374955
Name of responsible official My, Fa Robert Isacki
Title Plant Manager
iling address 3101 Pleasant Valley Blvd.
Area code and phone no. 814-943-1126
Name of person interviewed Mr. Thomas Hoppel, Mr. Gene Coltrin
Title Materials Engineer; Supervising Product Engineer
Mailing address (if different from above) Same
Area code and phone no. 814-943-1126
1. Current waste handling method:
b.  On-site  use,  reuse,  recycle,  reclaim
c Off-site treatment, storage, disposal
d.
2. Amount of hazardous waste produced:
42 47 47 47 A
b. 43,470 kg./yr.
3. Types of hazardous waste produced by Hazardous Waste Number:  FOO!
D005 F005
Are hazardous wastes transported off-site by the generator?   Yes   No

•	1- NON-COMPUNNCE, Z-COMPLANCE . S-1101 MET LANCE , S-1101 MET LANCE	-
STATUS JZ 3 4	REQUIREMENT (Red)	CHAPTE. CITATIC 75.262
	Identification number	(c)(1)
	Hazardous waste shipments offered only to licensed transporters	(ċ)(4)
	Authorization received from TSD facility for wastes shipped off-site	(d)
	PA manifest used for intrastate shipments	(e)(l)
	Disposer state manifest or EPA format manifest used for out-of-state shipments	(e)(l)
	Manifests filled out properly and completely	(e)(l)
1/1	Manifests routed properly and within time limits (24 hours)	(e)(2)
W	Proper U.S. DOT shipping containers or packages	(f) (l)
X	Shipping containers marked and labeled according to U.S. DOT	(f)(l)
	Containers of 100 gal. or less marked with required PA label	(f) (l)
7	Placards offered to transporter	(f)(2
Υ	Wastes accumulated on-site for less than 90 days	(g) (l
V	Wastes stored in proper containers and properly marked and labeled	(g)(l
V	Containers managed in accordance with 75.265(g)	(g) (l
N N	Containers clearly marked with accumulation date and visible for inspection	(g) (1
X	Records retained at designated location for 20 years.	(h)
V	Quarterly reports submitted to the Department	(i)
	Exception reporting procedures followed	(j)
X	Hazardous waste disposal plan, if required	(1).
X	Spill reporting procedures followed	(m) (1
77	Preparedness, Prevention and Contingency Plan approved and implemented	(m) (5
V	Special requirements followed for international shipments	(0)
		*

( 3 Or 1.15) eccao. 1.16 (272) 23	Concession manages	Data.
croany, Installation name Philips E.C.G.	INC	(Rea)
ouncy Blair Municipal	ity City of Altoona	
) Manifests not routed proper		5-81
nothing received back from T.		•,
z) Exception reporting procedur		within
seven days of expected arr		
or hazardous Waste Managen	/ 61	
determine shipment status. Th	en notify the Departme	ent.
within 24 hours by telephone	. Also submit a write	ten
report within 14 days of e	xpected waste arrival	1 date
10 department.		
3) Placards were not offered	to transporter.	
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is inspection report is official notification the nvironmental Resources, Bureau of Solid Waste Mana- ne findings of this inspection are shown in this ra- ring the inspection are indicated. Violations ma- esults of laboratory analyses and review of Depart	gement, inspected the above instead eport. Any violations which were y also be discovered upon examination will	e uncovered nation of the be forth-
oming, confirming any violations indicated herein		.c.tons.
rson Interviewed (signature)		- '
spector (signature) James , Yaina /7	Memas RS/compate March >	3,1981
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#### HAZARDOUS WASTE INSPECTION REPO. Generators - Part A



STATU:		I- NON-COMPLIANCE, Z-COMPLIANCE, 3-NOT APPLICABLE, H-NOT DETERMINED	(Red CHA
1 2 3		REQUIREMENT	Cir.
X	I	dentification number	(c)
X	H	Mazardous waste shipments offered only to licensed transporters	(¢) (
X	Aı	uthorization received from TSD facility for wastes shipped off-site	(d)
X		A manifest used for intrastate shipments	. (e) (
X	Di fo	isposer state manifest or EPA format manifest used or out-of-state shipments	(e)(1
×.	Με	anifests filled out properly and completely	(e) (i
X.	Ma	anifests routed properly and within time limits (24 hours)	(e) (:
X		coper U.S. DOT shipping containers or packages	(f)(
X	Sh	nipping containers marked and labeled according to U.S. DOT	(f) (1)
X	1	ontainers of 100 gal. or less marked with required PA label	(f) (1)
X	ì	acards offered to transporter	(f) (2
X	Was	stes accumulated on-site for less than 90 days	(g)(l
X		stes stored in proper containers and properly marked and labeled	(g)(l
X	ł	ntainers managed in accordance with .75.265(g)	(g) (1)
X	Con	ntainers clearly marked with accumulation date and visible for spection	(g) (J.)
X	Rec	cords retained at designated location for 20 years.	(h)
(	Ωua	rterly reports submitted to the Department	(i)
XII		eption reporting procedures followed	(j)
XII	Haza	ardous waste disposal plan, if required	(1)
XII	Spi:	ll reporting procedures followed	(m) (1)
X	Prep	paredness, Prevention and Contingency Plan approved and implemented	(m) (5)
X	1	cial requirements followed for international shipments	(0)
	.50	afety training [265(f)]	(3)(v)

Date of inspection December 9, 1981 Identif	ication number PADO 04374955
company, Installation name Philips ECG.	4194)
County BLAIR Municipal	ity Altoona City
D The PPC plan should be personnel training program	included as part of the
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Commission of Allerth of Superametrians are related with the and although and the second superametric and the process of the Allerth and the superametric an	
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And the second section of the section of the second section of the section of the second section of the second section of the sectio	
This inspection report is official notification that invironmental Resources, Bureau of Solid Waste Mana he findings of this inspection are shown in this returning the inspection are indicated. Violations makes are laboratory analyses and review of Depart oming, confirming any violations indicated herein	gement, inspected the above installation. eport. Any violations which were uncovered y also be discovered upon examination of the ment records. Notification will be forth-
Person Interviewed (signature)	Date 12/9/8/
January January	



0 1
Date of inspection December 9/98/ Time start 100 pm Time finish 2300pm
Name of inspector James J. Young
Company name Philips E.C.Co
Location 3101 Pleasant Valley BLVd.
county BLAIR Municipality Altona city
Identification number PAO 004374955
Name of responsible official MB Robert 152cki
Title Phant Mar,
ailing address Sa Ml
Area code and phone no. 814-943-1126
Name of person interviewed MR. Thomas Nopple
Title Materials engineer.
Mailing address (if different from above) Same
Area code and phone no. Same
1. a. PA hazardous waste transporter (HWT) license number W.A.
b. Expiration date
?. Hazardous waste handling: Ø N/A
a. / Blending, mixing
b.
c.  Use,  reuse,  recycle,  reclaim
3. Does the transporter generate hazardous wastes? / Yes / No
4. Types of hazardous waste produced by Hazardous Waste Number:
. Are hazardous wastes transported into the Commonwealth from abroad?  Yes  No
orig to R.O. Am FJ.B. & T. S.
Field

OMPL	I/M	(5)	1- NON-COMPLIANCE, Z-COMPLIANCE : 3-NOT APPLICACED, N-NOT OBTER MAD (Red)	CITATIO
STAT			REQUIREMENT	75.263
1	1	7	Identification number	(d)
	1	-	Company licensed by PA DER	(c)
-	1		Copy of license kept on vehicles transporting hazardous wastes	(c)(8)
-			Licensee transporting only wastes conditioned on the license	(c) (8)
-	IX I	-	Manifest accompanies all shipments	(d)
1	1		Required number of copies of the manifest accompanies shipment	(d) (9.)
-	X		Shipments comply with U.S. and PA DOT requirements	(a) (9)
-	10		Entire quantity as stated on the manifest delivered	(d) (9)
-	N		Undeliverable shipment procedures followed	(d)(l
-	11		Normal in-transit storage of waste (only if specified on the manifest)	(e)(2
-	A			(f)
	K		Records retained at designated location	(g) (6
	X		Contingency plan approved and implemented	(h) (2
	X		Appropriate and adequate safety equipment carried on transport vehicle	(h) (3
_	X		Equipment decontamination procedures followed  Contaminated washwater, waste solutions, residues disposed of in accordance	
	X		with regulations Sufficient absorbent material in vehicle when transporting liquids in	(h) (4
Mary Physics Rept.	X		containers of 100 gallons or less.	
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Company, Installation name Philips ECG	
Country R(5/8	ality ALton Wa
the Country is not	and does not wish to
This tacifity is not	dud does not wish to
betome a Hazardous Waste	transporter.
They did not send in	for PA. LICENSE,
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CONTRACT AND	Company of the second s
This inspection report is official notification th	pat a representative of the Department of
Environmental Resources, Bureau of Solid Waste Mar the findings of this inspection are shown in this uring the inspection are indicated. Violations we results of laboratory analyses and review of Department, confirming any violations indicated herein	report. Any violations which were uncovered ay also be discovered upon examination of the timent records. Notification will be forth-
Person Interviewed (signature) thomas of.	2/1001 Date 12-9-81
aspector (signature) James 4. Youn	Date 12-9-81

Λ -/ - 2	ineg)
Date of inspection Dec. 9,1981	Time start 150 pm. Time finish 2:30 pm
Name of inspector James J. Young	}
Company, installation name Philips FCA	
Location 3101 PLOASANT Valley	Blvd.
County BLAIR . Mun	icipality City of AltooNA
Identification number PAD 00437495	
Name of responsible official Mr. Robert	
Title Phant Mg.R.	
Mailing address Samp	
Area code and phone no. 8/4-943-1/26	
Name of person interviewed Mr. Thomas.	
Title Materials Engineer	
Mailing address (if different from above) $\underline{Sa}$	me.
Area code and phone no. Same	
Area code and phone no. SQVIII	
*	
1. Site characterization:	
a.   Treatment -   surface impoundment	ents, / chemical, / physical, / biologica
b. 🛮 Storage - 🖾 containers, 🖾 tar	ks,  surface impoundments,  waste piles
c. Disposal - Dand treatment, D	7 landfill, / incineration, / thermal tre
d. 🖾 Use, 🖂 reuse, 🖾 recycle, 🗷	
2. Does the facility generate hazardous wast	es? 🛮 Yes 🔲 No
3. Types of hazardous waste produced by Haza	rdous Waste Number:
F001 0005 F005	
4. Are hazardous wastes transported off-site	by the facility? 🖊 Yes 🔀 No
• _ • • • • • • • • • • • • • • • • • •	

Field Copy V ovig to R.O thru F.T. Bertouich

1- NON-COMPLIANCE, Z-COMPLIANCE   3-NOT APPLICABLE, 4-NOT DETER	MALIA DIES
REQUIREMENT	75.265
	(a) (2),(
	(p).
Wastes accepted at facility transported by haulers licensed to transport hazardous waste by the Department	(b)(l)
Waste streams not covered by permit approved by the Department before accept	ince (c
	(c)(l)
All waste shipments inspected and sampled	(c)(2)
	(c) (3)
24 hr. surveillance at active portion	(d) (2)
	(d) (2)
	(d) (3)
	(e) (2)
Maintenance schedule on-site for equipment or structures which reveal	(e) (4)
Immediate remedial action taken where a hazard is imminent or has arready	(e) (4)
	(f)
Records retained for each employee at facility of training, job title, and	(£) (6)
	(g)(1)
Ignitable or reactive wastes separated from source of Type or reactive wastes separated from source or reactive wastes separated from source or reactive wastes and the separated from the	(g) (1)
wastes wastes or mixing of	(g) (2)
Facility equipped with internal alarm system capable of providing immediates	(h) (2)
Facility equipped with a device for summoning outside emergency assistance	(h) (2)
Facility equipped with fire control, spill control, and decontamination	(h) (2.)
Facility equipped with water at adequate volume and pressure to supply life	(h) (2)
Facility communications or alarm systems, fire control, spill control, and	(h) (3)
Adequate aisle space maintained to allow unobstructed movement of personner	(h) (6)
	(i)(l)
Contingency plan describes action taken by personnel in the event of an	(i)(3)
Contingency plan describes arrangements agreed to for outside emergency services such as police and fire department, hospitals, contractors, etc.	(1) (5
	Part A permit application submitted  Identification number  Mastes accepted at facility transported by haulers licensed to transport hazardous waste by the Department  Waste streams not covered by peimit approved by the Department before accept Chemical and physical analyses repeated as required  All waste shipments inspected and sampled  Waste analysis plan on-site  24 hr. surveillance at active portion  Artificial barrier at active portion  Proper signs posted and legible at a distance of at least 25 ft.  Inspection schedule on-site  Maintenance schedule on-site for equipment or structures which reveal deterioration or malfunction  Immediate remedial action taken where a hazard is imminent or has already occurred  On the job or classroom personnel training program  Records retained for each employee at facility of training, job title, and job description  Ignitable or reactive wastes separated from source of ignition or reaction wastes  Treatment, storage, disposal of ignitable or reactive wastes or making of incompatible wastes or materials conducted according to requirements  Facility equipped with internal alarm system capable of providing immediate emergency instruction to personnel  Facility equipped with advice for summoning outside emergency assistance  Facility equipped with a device for summoning outside emergency assistance  Facility equipped with internal alarm system capable of providing immediate emergency instruction to personnel  Facility equipped with advice for summoning outside emergency assistance  Facility equipped with internal alarm system and pressure to supply fire control equipment  Facility communications or alarm systems, fire control, spill control, and decontamination equipment tested and maintained.  Adequate alse space maintained to allow unobstructed movement of personnel and equipment during emergencies  Contingency plan on-site and implemented  Contingency plan describes action taken by personnel in the event of an energency.

			1- HON-COMPLIANCE, Z-COMPLIANCE , 3-NOT APPLICABLE, 4-NOT DOTE. HALD PRICE	M
STI	אונוי	)	REQUIREMENT .	75.20
K	. 3	14	Contingency plan contains an up-to-date list of names, addresses and phone numbers of all persons qualified to act as emergency coordinator.	(i) (6)
X			Contingency plan contains list of emergency equipment including location, physical description and capabilities of each item	(i) <sub>(</sub> 7
1			Contingency plan contains an evacuation plan if there is a possibility that evacuation could be necessary	(i)(8
X			One employee designated as the primary emergency coordinator either on the premises or on call.	(i)(l
	X		Facility accepting only PA manifests	(j)
X	X		Manifests properly completed and routed within time limits (24 hrs.)	(j)(2
X	×		Manifest discrepancies resolved or reported within time limits	(j) (i
X			Written operating record maintained on the premises	(k)
1X			Written operating record contains description and quantity of wastes and method of treatment, storage or disposal	(k) (2
X			Written operating record contains location and quantity of each hazardous waste	(k) (2
X	X		Written operating record contains results of waste analyses and treatability tests	(k) (2
X			Written operating record contains reports and details of all incidents	(k) (2)
X			Written operating record contains records and results of all inspections	(k) (2)
X	1		Written operating record contains required monitoring, testing, and analytical data	(k) (2)
X			Written operating record contains closure and post-closure cost estimates	(k) (2)
X			All records retained on premises and available for inspection	(1)
X			Quarterly reports submitted to the Department	(m)
		X	Emissions, discharges, fires, explosions, and groundwater contamination reported as required	(m) <sub>(2)</sub>
	X		Groundwater monitoring wells located at approved sites	(n) (2)
	X		Adequate protection of groundwater monitoring wells	(n)(7)
_	X		Groundwater sampling and analysis plan on the premises	(n) (8)
	X		Groundwater quality assessment and abatement outline on the premises	(n) (l4
	X		Closure plan on the premises and up-to-date	(0) (2)
	X			(0) (10
X		-	Annual closure cost estimate on the premises and up-to-date	p)(2)
X		1	Annual post-closure cost estimate on the premises and up-to-date	p)(5).

LMMAD - MA

1- NON-COMPLIANCE, Z-COMPLIANCE, 3-NOT APPLICABLE, 4-NOT DETERMINED CHAPTER CITATION COMPLIANCE REQUIREMENT STATUS 11234 (q)(1), Containers managed to prevent leaks and spills (q)(2)Containers are compatible with waste stored. (q)(3)Containers are closed during storage Container storage area inspected weekly for leaks, deterioration, etc. (q)(5)Containers holding ignitable or reactive wastes are set back 15 m (50 ft) (q)(6)from property line. Satisfactory procedures followed for handling incompatible wastes. (q)(7),Incompatible wastes separated or protected from other materials. (q)(9)Act 97 Containers and tanks labeled to identify accurately hazardous waste Section 403(b Precautions taken for tanks holding ignitable, reactive, or incompatible (r)(2)waste or material Tanks managed to prevent leaks, rupture, corrosion, or otherwise failing. (r)(3)Uncovered tanks operated to ensure at least 60 cm (2 ft) of freeboard. (r)(4)Uncovered tanks equipped with an overflow alarm and an overflow device to a (r)(4)standby tank with a capacity equal to or exceeding the freeboard requirement Continuously fed tanks equipped with a means to stop the inflow. (r)(5)Containment structure with a capacity that equals or exceeds the largest above ground tank volume plus a reasonable allowance for precipitation based (r) (6) on local weather conditions and plant operations provided for liquid storage in above ground or partially above ground tanks. Waste analyses and/or trial tests conducted on hazardous wastes substantially (r) (7) different from wastes previously treated or stored; or chemically treat hazardous waste with a substantially different process than any previously used in that tank. (r)(8)Discharge control equipment inspected once each operating day. (r)(8)Monitoring equipment data inspected once each operating day. (r)(8)Liquid level of tanks inspected once each operating day. (r)(8)Construction materials of tanks inspected weekly. Construction materials of discharge confinement structures and area (r)(8)immediately surrounding inspected weekly. All hazardous waste removed from tanks and related appurtenances at (r) (9) closure. Placement of ignitable or reactive waste only with the Department's approval (r) (10 Covered tanks in which ignitable or reactive waste is treated or stored (r)(1)meets NFDA buffer zone requirements. Precautions taken for handling ignitable, reactive or incompatible waste (r) (1: or material.

# HAZARDOUS WASTE INSPECTION REPORT Generators - Part A



Date of inspection $\frac{6/29/52}{52}$ Time start $\frac{9.35}{4}$ Time finish
Name of inspector LORI J. DAVIS
Company, installation name PHILIPS ECG, INC.
Location 3101 Pleasant Valley Blvd.
County BLAIR Municipality Altoons
Identification number PAD 00 437 4955
Name of responsible official My. Robert Tsacke
Title Plant Manager
Mailing address Same
Area code and phone no. (814)-943-1126
Name of person interviewed Mr. Thomas Hoppel
Title Materials Engineer
Mailing address (if different from above)
Area code and phone no. Same.
1. Current waste handling method:
a. 🗷 On-site 🖊 treatment, 🗶 storage, 🖊 disposal
b. Ø On-site Duse, Dreuse, Drecycle, Ø reclaim - dishillation of trichlorcothy lone
c. / Off-site / treatment, / storage, / disposal
d.   Off-site   use,   reuse,   recycle,   reclaim
2. Amount of hazardous waste produced:
a. <u>2,478</u> kg./mo.
b. 29,740 kg./yr.
3. Types of hazardous waste produced by Hazardous Waste Number:  Foo   Doo 5  Foo 2  Foo 5
4. Are hazardous wastes transported off-site by the generator?   Yes No
ginul to R.O. + hum F. Fair

-				1- NON-COMPLIANCE, Z-COMILIANCE, 3-NOT APPLICABLE, 4-NOT DETER NED	r r			
OMPHANCE STATUS			REQUIREMENT					
+		3 4	+		75.262			
'.	2	_		Identification number	(c)(1)			
1	Hazardous waste shipments offered only to licensed transporters							
	Authorization received from TSD facility for wastes shipped off-site							
1	2			PA manifest used for intrastate shipments	(e)(1)(i)			
	2			Disposer state manifest or EPA format manifest used for out-of-state shipments	(e)(l)(iii			
1	2			Manifests filled out properly and completely	(e)(l)			
- majoritanismis		3		Manifests routed properly and within time limits (24 hours)	(e)(2)			
		4	1	Proper U.S. DOT shipping containers or packages	(f)(1)(i)			
-	5-			Shipping containers marked and labeled according to U.S. DOT	(f)(l)(ii)			
	2			Containers of 110 gal. or less marked with required PA label	(f) (l) (ii			
	2		Placards offered to transporter (f					
		3	Wastes accumulated on-site for less than 90 days (g)					
	2		Wastes stored in proper containers and properly marked and labeled (g)					
	2			Containers managed in accordance with 75.265(g) (g) (g) (1				
	2			Containers clearly marked with accumulation date and visible for inspection (g)(1				
_	2			Records retained at designated location for 20 years (h)				
4	2			Quarterly reports submitted to the Department	(i)			
1				Exception reporting procedures followed	(j) .			
		3		Hazardous waste disposal plan, if required	(1)			
		3		Spill reporting procedures followed	(m) (l)			
		4	1	Preparedness, Prevention and Contingency Plan approved and implemented	(m) (5)			
		3		Special requirements followed for international shipments	(0)			
		- 4	1	Personnel training 75.265 (1)	9(0)			
		-	-		-			

#### "AZARDOUS WASTE INSPECTION REPORT Part C - Comments

generater ORIGINAL

Tate of inspec	ction 4/29/82	Identific	ation number	PAD	00 437 V955
	allation name Philip		n C	48	
ounty B			yA1F		
1-Write:	authorization i amend moniks he eined from a 75	was not reco	eined from Wnite	n Indus	Twal Solvents Have
1/20/82	ion reporting programment sent to =  Le A copy of the  Le exception re	trontier Chem Manifest f	act B	was fin	NY, sent on
- Waske dispas	trichlorethylene	2 13 dishilk	dou-site	. The Shil	1 bottoms aie
- A mo	V.C	1	· Salak at an arang at a salak at	DOFSOM-NC	
has be	re in depth of	ed since the	last ins	e troini	ng Programs
- 4911 k	reviewed at	ong with t	aux B A	ulinis.	on to Dept.
man manual Materials faultures from de parties start (a.m.s to - pro o'r redd	eerbar vario are e retur suit in suit in various signi serverent i				*
management was up to a	The second secon	en de de la companya	tan in a samuahan kang paga paga sa pa		
·	makan kanna Marangan (k. 1814). Takan kalin kalin kalin kana kalin kalin kalin kalin kalin kalin kalin kalin ka	•	2		
	*		The state of the s	The transfer of the contract o	and the time of the first terminal flower of the state of
ne findings of uring the inspesults of labo	report is official not be sources, Bureau of South this inspection are section are indicated. The ratory analyses and resing any violations income.	shown in this representations may	ement, inspector. Any vialso be discount records	cted the about olations who covered upon	ove installation.  nich were uncovered  n examination of the
	wed (signature)	× 7	Popper !	Date 6/	129/82
ispector (sign	ature) Jau	Laura		Date 61	29/82
	( )				

# HAZARDOUS WASTE INSPECTION REPORTS Facilities - Part A



Date of inspection 6/29/82 Time start 5.35 A M Time finish
Name of inspector Lori J. Davis
Company, installation name Philips ECG Inc.
Location 3101 Pleasant Valley Blud.
County BLAIR Municipality Altoons
Identification number PAID 00 437 4955
Name of responsible official Mr. Pribate Isacke
Title Plant Manager
Mailing address
area code and phone no. $814 - 943 - 1126$
Name of person interviewed Mr. Thomas Happe
Title Materials Englice
Mailing address (if different from above)
Area code and phone no. Jame
1. Site characterization:
a.  Treatment -  surface impoundments,  chemical,  physical,  biological
b. 💢 Storage - 📈 containers, 🔀 tanks, 🖂 surface impoundments, 🖂 waste piles
c. $\square$ Disposal - $\square$ land treatment, $\square$ landfill, $\square$ incineration, $\square$ thermal treat
d.   Use,   recycle,   reclaim  ment
2. Does the facility generate hazardous wastes? Yes No
3. Types of hazardous waste produced by Hazardous Waste Number:  FOOT DOO;  FOOT DOO;
4. Are hazardous wastes transported off-site by the facility? / Yes X No

		1- NON-COMPLIANCE, Z-COMPLIANCE, 3-NOT APPLICABLE, H-NOT DETERMINED	CHA	
STATUS		REQUIREMENT	CITA	
23			75.	
2		Part A permit application submitted	(a) (	
2		Identification number	(b)	
5	3	Wastes accepted at facility transported by haulers licensed to transport hazardous waste by the Department	(b)	
3	3	Waste streams not covered by permit approved by the Department before accept	nce	
3	3	Chemical and physical analyses repeated as required	(c)	
(3)	3	All waste shipments inspected and sampled	(c)	
3	3	Waste analysis plan on-site	(c)	
12		24 hr. surveillance at active portion	(d)	
2-		Artificial barrier at active portion	(d)	
2		Proper signs posted and legible at a distance of at least 25 ft.	(d)	
	4	Inspection schedule on-site	(e)	
3	3	Maintenance schedule on-site for equipment or structures which reveal deterioration or malfunction	(e)	
24		Immediate remedial action taken where a hazard is imminent or has already occurred	(e)	
	4	On the job or classroom personnel training program	(f)	
	4	Records retained for each employee at facility of training, job title, and job description	(f)	
2		Ignitable or reactive wastes separated from source of ignition or reaction	(g)	
2		No smoking signs displayed where there are hazards from ignitable or reactive wastes	(5)	
2		Treatment, storage, disposal of ignitable or reactive wastes or mixing of incompatible wastes or materials conducted according to requirements	(g)	
2		Facility equipped with internal alarm system capable of providing immediate emergency instruction to personnel	(h)	
7		Facility equipped with a device for summoning outside emergency assistance	(h)	
2-		Facility equipped with fire control, spill control, and decontamination equipment	(h)	
	4	Facility equipped with water at adequate volume and pressure to supply fire control equipment	(h)	
	4	Facility communications or alarm systems, fire control, spill control, and decontamination equipment tested and maintained.	(h)	
2		Adequate aisle space maintained to allow unobstructed movement of personnel and equipment during emergencies	(h)	
	4	Contingency plan on-site and implemented	(i)	
	4	Contingency plan describes action taken by personnel in the event of an emergency	(i)	
	4	Contingency plan describes arrangements agreed to for outside emergency services such as volice and fire department, hospitals, contractors, etc.	. (	

1- NON-COMPLIANCE, Z-COMPLIANCE, 3-NOT APPLICABLE, 4-NOT DETERMINED MPHANCE CHAPTER STATUS CITATION REQUIREMENT 23/14 75.265 Contingency plan contains an up-to-date list of names, addresses and phone (i)(6)numbers of all persons qualified to act as emergency coordinator. Contingency plan contains list of emergency equipment including location, (i)(7)physical description and capabilities of each item Contingency plan contains an evacuation plan if there is a possibility (i)(8)that evacuation could be necessary One employee designated as the primary emergency coordinator either on the (i)(ll) premises or on call. (j)13 Facility accepting only PA manifests 3 Manifests properly completed and routed within, time limits (24 hrs.) (j)(2)(3)Manifest discrepancies resolved or reported within time limits 3 (j)(10)Written operating record maintained on the premises (k) Written operating record contains description and quantity of wastes and 3 (k)(2)(i)method of treatment, storage or disposal Written operating record contains location and quantity of each hazardous (k)(2)(iwaste Written operating record contains results of waste analyses and treatability 3 (k)(2)(i3 (k)(2)(i)Written operating record contains reports and details of all incidents Written operating record contains records and results of all inspections (1:)(2)(vWritten operating record contains required monitoring, testing, and 3 (E) (2) (T analytical data Written operating record contains closure and post-closure cost estimates (k) (2) (v All records retained on premises and available for inspection (1)Quarterly reports submitted to the Department (m) Emissions, discharges, fires, explosions, and groundwater contamination 3 (m)(2)reported as required 3 Groundwater monitoring wells located at approved sites (n)(2)-2 Adequate protection of groundwater monitoring wells (n) (7) Groundwater sampling and analysis plan on the premises (n)(8)3 Groundwater quality assessment and abatement outline on the premises (n)(14)Closure plan on the premises and up-to-date (0)(2)-(Post-closure plan on the premises and up-to-date (0)(10) -2 Annual closure cost estimate on the premises and up-to-date (p)(2)-(Annual post-closure cost estimate on the premises and up-to-date p) (5) - (

75.265

OMPHANCE STATUS		1- NON-COMPUNCE, Z-COMPUNCE, 3-NOT APPLICABLE, 4-NOT DETERMINED	CHAPTER
_	3 4	REQUIREMENT	Cirritia
3		Containers managed to prevent leaks and spills	(q)(1),
2		Containers are compatible with waste stored.	(q)(2)
2	â	Containers are closed during storage	(q)(3)
2		Container storage area inspected weekly for leaks, deterioration, etc.	(q) (5)
2		Containers holding ignitable or reactive wastes are set back 15 m (50 ft) from property line.	(q) (6)
	3	Satisfactory procedures followed for handling incompatible wastes.	(g)(7),
	3	Incompatible wastes separated or protected from other materials.	(q) (9)
2	-	Containers and tanks labeled to identify accurately hazardous waste contained. Section	Act 97 on 403(b
2	-	Precautions taken for tanks holding ignitable, reactive, or incompatible waste or material	(r)(2)
2	-	Tanks managed to prevent leaks, rupture, corrosion, or otherwise failing.	(r)(3)
	3	Uncovered tanks operated to ensure at least 60 cm (2 ft) of freeboard.	(r) (4)
	3	Uncovered tanks equipped with an overflow alarm and an overflow device to a standby tank with a capacity equal to or exceeding the freeboard requirement	
	3	Continuously fed tanks equipped with a means to stop the inflow.	(r)(5)
	3	Containment structure with a capacity that equals or exceeds the largest above ground tank volume plus a reasonable allowance for precipitation based on local weather conditions and plant operations provided for liquid storage in above ground or partially above ground tanks.	(r)(6)
	3	Waste analyses and/or trial tests conducted on hazardous wastes substantiall different from wastes previously treated or stored; or chemically treat hazardous waste with a substantially different process than any previously used in that tank.	y (r)(7)
	3	Discharge control equipment inspected once each operating day.	(r)(8)(i
	3	Monitoring equipment data inspected once each operating day.	(r)(8)(i
1	3)	Liquid level of tanks inspected once each operating day.	(r)(8)(i
	3	Construction materials of tanks inspected weekly.	(r) (8) (i
2		Construction materials of discharge confinement structures and area immediately surrounding inspected weekly.	(r) (8) (v
	3	All hazardous waste removed from tanks and related appurtenances at closure.	(r)(9)
2	4	Placement of ignitable or reactive waste only with the Department's approval	(r)(10)
1	3,1	Covered tanks in which ignitable or reactive waste is treated or stored meets NEDA buffer zone requirements.	r)(11)
	3	Descriptions to an formation of incompatible waste	(r) (1Z)

#### Part C - Comments

TSD

	Part C - Comment	S	135
ate of inspection 6/29/82	Identificati	on number PAD a	5 43 784955
Company, Installation name Philip	= ECG Inc		(Red)
ounty Black		Altoone.	
! - The written operal	ting record 1	must contain	e resucts
of all impactions,	as per 73	5. 265 (K)(2)(	r), the
- frequency of we sections for the	hich is del	ru question,	the opprograate
- Waste trichloraethyl	ene 15 awril	led on-site	the stil
- Waste trichlorwerhyl - Do Homs are dispasse	doj as Foo:	2 waste	
- A more in depth old program has been i This will be Neviewed the Department	cumentation implemented a along with	of the person Since the last Part Bof Si	inspection to
e distance for a serial field differ the base stop in section of the contract	and the state of t	From a distribution of the second of the sec	Million & Author (Charles Mallion & Albertans) (1977) — (1978) (1978) (1978) (1978)
And the state of the second se	er emantidate anna i merdebberga an artificiale (1975) an	sona sono conservadore de la con	The second secon
The second section of the second seco	en en energe deservices de la composition de la	of stable in the aborder could nonedure (nonember a place)	And treatment and account to the principle of the contention of the con-
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This inspection report is official not nvironmental Resources, Bureau of Sol ne findings of this inspection are sh luring the inspection are indicated. esults of laboratory analyses and rev oming, confirming any violations indi	lid Waste Managemen hown in this report Violations may als view of Department	. Any violations we be discovered upo	which were uncovered on examination of the
Person Interviewed (signature)	mes 6 Ha	port Date 6	129/82
nspector (signature)	Carro	Date 6	129/82

Date of inspection 10/12/82	Identi	fication number $\cancel{F+0}$	0043.749 55
Company, Installation name Phulips	206		(Ked)
county Blair	Municipa	lity Altound	
June 27, 1982, Met 1	a follo	wup of the ing	pection of
- Mr. Hoppel was inform			
to light by letter from			
which requies strage faci	litie to	meet requien	ient, of 265(k)(2)
Mr. Hoppel already maint	auso a	similar supri	ing record ofor
drum area, and agreed	d to sy	ograde I to M	est requirement
Decrim.		Commence of the second	1
- Planet has met regniser	//		
6/29/82 inspection, but -			
wrote selvent storage are			
- Letter of Authorization	C. Commander	or required by	the for
- Mariforts must to	o insico	Lor Shipman	The Man
Aland to Maria ( )	Ancita	the control of the	voct he
Act 75.201 (e) stars has	with	those pullestu	dore
Sipt-4, 1982			ings and whomen represents to the fi
mand mand the artists of discussions to the foundation of the first of the state of		and the second s	ing case of commentation activities of the incident
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The particular desirability fluids and interference representative services. For making 12 of 1 \$ 1 and 4 and 5 and 6 an			
This inspection report is official notification in the Environmental Resources, Bureau of Solid The findings of this inspection are shown during the inspection are indicated. Vice results of laboratory analyses and review coming, confirming any violations indicated.	Waste Mar n in this plations m w of Depar	report. Any violations ay also be discovered to the timent records. Notific	s which were uncovere upon examination of to cation will be forth-
Person Interviewed (signature)	9. 4	pace Date_	10-12-82
ospector (signature) Soul Li	avis	Date /	10/12/62

# Generators - Part A

GC.IGZ.GGZ.G
Date of inspection May 25, 1983 Time start 1:15 Time finish 2:15
Name of inspector Mark S Embeck
Company, installation name Philips ECG, Inc.
Location 3101 Pleasant Valley Blud.
County Blair Municipality Altoma
Identification number PAD 00437495.5
Name of responsible official Mr. Robert Isacke
Title Plant Manager
miling address Same
Area code and phone no. (814) - 943-1126
Name of person interviewed Thomas Hoppe
Title Materials Engineer
Mailing address (if different from above) Same
Area code and phone no. Same
1. Current waste handling method:  Less than 90 days
a.  On-site   treatment   storage,   disposal
b. Ø On-site wse, reuse, recycle, reclaim
c Off-site treatment, storage, disposal
d.
2. Amount of hazardous waste produced:
a. <u>2,478</u> kg./mo.
b. <u>29,740</u> kg./yr.
3. Types of hazardous waste produced by Hazardous Waste Number:
FOOL DOOL
FCC 5 4. Are hazardous wastes transported off-site by the generator?   Yes  No
Chita F Fair

MPLIANCE	1- NON-COMPUANCE, Z-COMPUANCE, 3-NOT APPLICABLE, 4-NOT DETERMINED	CHAPTER
STATUS	REQUIREMENT	75.262
234	Identification number	(c)(1)
2	Hazardous waste shipments offered only to licensed transporters	(¢)(4)
3	Authorization received from TSD facility for wastes shipped off-site	(d)
2	PA manifest used for intrastate shipments	(e)(1)(
2	Disposer state manifest or EPA format manifest used for out-of-state shipments	(e)(l)(i
2.	Manifests filled out properly and completely	(e)(l)
2	Manifests routed properly and within time limits (24 hours)	(e)(2)
	Proper U.S. DOT shipping containers or packages	(f)(l)(
2	Shipping containers marked and labeled according to U.S. DOT	f)(1)(i
2	Containers of 110 gal. or less marked with required PA label	(f)(1)(i
2	Placards offered to transporter	(f)(2)
2	Wastes accumulated on-site for less than 90 days	(g)(l)
2	Wastes stored in proper containers and properly marked and labeled	(g)(l)(
2	Containers managed in accordance with 75.265(g)	(g)(l)(
2	Containers clearly marked with accumulation date and visible for inspection	(g)(l)(
	Records retained at designated location for 20 years.	(h)
2	Quarterly reports submitted to the Department	(i)
3	Exception reporting procedures followed	(j)
3	Hazardous waste disposal plan, if required	(1)
2	Spill reporting procedures followed	(m)(l)
2	Preparedness, Prevention and Contingency Plan approved and implemented	(m) (5)
3	Special requirements followed for international shipments	(0)
2	Safety Training 75.265 (F)	

ate of inspection <u>May 25, 1983</u> Iden	tification number	PAD 004 374 955
ate of inspection ///ag 5, //es	5 Truc	PRIGINAL
ompany, Installation name Philips ECO	n Home	(red)
County Blair Municipali	ty <u>41400110</u>	
		1 1 -+
Philips ECG h	as segues	ted return
of Part A as they se	- longer ce	rich to
be considered a stora	ge facilità	e of the
le considered a stora  time of this inspects	or all	trage was
dess than 90 day	s acculm	ulation.
all other as	eas of in	spection
were found to ?	e in con	npliance.
The state of the s		
Environmental Resources, Bureau of Solid Waste Manache findings of this inspection are shown in this turing the inspection are indicated. Violations mather results of laboratory analyses and review of Deforthcoming, confirming any violations indicated hereson Interviewed (signature)	eport. Any violat y also be discover partment records. rein and listing a	ions which were uncovered ed upon examination of Notification will be
Inspector (signature) This I factor		ate/-~/5=
nspector (signature)		

## HALL DOUS WASTE INSPECTION REPORT Generators - Part A

ORIGINAL (Red)

ate of inspection June 14, 1984 Time start 10:45 Time finish 11:30
Name of inspector Mark 5. Embeck
ompany, installation name Philips ECG, Truc.
Location 3101 Pleasant Valley Blud.
Lounty Blair Municipality Altoma
dentification number PAD 004 374 955
Name of responsible official Mr. Robert Isacke
itle Plant Manager
M ing address Same
rea code and phone no. (814) 943-1126
Tame of person interviewed Mr. Thomas Hoppel
Title Makerials Engineer
ailing address (if different from above) Same
Area code and phone no. Same
l. Current waste handling method:
a. Ø On-site / treatment, Ø storage, / disposal
b. Ø On-site use, reuse, recycle, reclaim
c Off-site treatment, storage, disposal
d.
2. Amount of hazardous waste produced:
Types of hazardous waste produced by Hazardous Waste Number:
FOC 2 DOC
. Are hazardous wastes transported off-site by the generator?   Yes No  C: R.O. thru F. Fair  C.O. thru R.O.

	1- NON-COMPLIANCE, Z-COMPLIANCE, 3-NOT APPLICABLE, 4-NOT DETERMINED	1 2112-5
COMPLIAN STATUS	REQUIREMENT	CHAPTER CITATION 75.262
123	Identification number	(c)(l)
2	Hazardous waste shipments offered only to licensed transporters	(c) (4)
2	Authorization received from TSD facility for wastes shipped off-site	(d)
2	PA manifest used for intrastate shipments	(e)(l)(i
2	Disposer state manifest or EPA format manifest used for out-of-state shipments	(e)(l)(ii
2.	Manifests filled out properly and completely	(e)(l)
2.	Manifests routed properly and within time limits (24 hours)	(e)(2)
	Proper U.S. DOT shipping containers or packages	(f)(l)(i
	Shipping containers marked and labeled according to U.S. DOT	f)(1)(ii
	Containers of 110 gal. or less marked with required PA label	f)(1)(ii
2	Placards offered to transporter	(f)(2)
2	Wastes accumulated on-site for less than 90 days	(g)(l)
	Wastes stored in proper containers and properly marked and labeled	(g)(l)(i
	Containers managed in accordance with 75.265(g)	(g)(l)(i
	Containers clearly marked with accumulation date and visible for inspection	(g)(l)(i
1	Records retained at designated location for 20 years.	(h)
2	Quarterly reports submitted to the Department	(i)
3	Exception reporting procedures followed	(j)
3	Hazardous waste disposal plan, if required	(1)
2	Spill reporting procedures followed	(m) (l)
2	Preparedness, Prevention and Contingency Plan approved and implemented	(m) (5)
	Special requirements followed for international shipments	(0)
2	Personnel training 75.265 (F)	

# ZARDOUS WASTE INSPECTION REPOR Part C - Comments ace of inspection June 14 1984 Identification number PAID 004374955 pany, Installation name Philips &CG is inspection report is official notification that a representative of the Department of nvironmental Resources, Bureau of Solid Waste Management, inspected the above installation. ne findings of this inspection are shown in this report. Any violations which were uncovered

ring the inspection are indicated. Violations may also be discovered upon examination of the sults of laboratory analyses and review of Department records. Notification will be forth-

Date 6-/4-84

oming, confirming any violations indicated herein and listing any additional violations.

rson Interviewed (signature)

spector (signature) Marks Emleck

ER-SWM-117: 2/85

# COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL RESOURCES BUREAU OF SOLID WASTE MANAGEMENT



#### INSPECTION REPORT

Site Name: Phillips ECG, INC. Pho	ne # (814) <u>943-//26</u>
	te PA Zip Code 16602
Responsible Official Robert Isacko Title Person Interviewed C.P. Karakantas Title Inspector Mark S. Embeck	Pryect Engineer
Inspection Type  1 Routine 4 Follow Up 5 Crit Stage 6 Sample Only 7 Permitting 7 Ground Water 7 Survey 9 Other 10 Survey  11 Part B 51 Routine 54 Follow Up 54 Follow Up 55 Sample 60 Survey 60 Survey 61 Complaint 62 Complaint 63 Superfund 64 Follow Up 65 Sample 66 Survey 67 Permitting 68 Superfund 69 Other 69 Other 60 Survey 61 Other 62 Complaint 63 Superfund 64 Closure 65 Survey 66 Complaint 67 Record Rev 68 Other 69 Other 69 Other	Hazardous ☒ Treatment ☐  Residual ☐ Storage ☐  Municipal ☐ Disposal ☐  Generator ☐  Processing ☐
Site ID # PAD 0 0 4 3 7 4 9 5 5	On-Site Start Time 10:45 On-Site End Time 1:45 On-Site Total Time
	pector ID # # Violation Enforcement
Comment	
Sample # Low Sample # High	
Monitoring Points Sampled	

## HAZARDOUS WASTE INSPECTION REPORT Generators - Part A



Date of inspection Opril 7, 1986 Time start 10:45 Time finish 11:45
Name of inspector Mark S. Embeck
Company, installation name Phillips ECG, INC.
Location 3101 Pleasand Valley Blod., Altoona, PA 16602
County Blair Municipality Altoona
Identification number PAD 004 374 955
Name of responsible official Mr. Robert Isacke
Title Plant Manager
ailing address Same
Area code and phone no. (814) 943 -/126
Name of person interviewed C.P. Kanakantas
Title Project Engineer
Mailing address (if different from above) Same
Area code and phone no. Same
1. Current waste handling method:
a.  On-site  treatment  storage,  disposal
b.
c. / Off-site / treatment, / storage, / disposal
d.   Off-site use, reuse, recycle, reclaim
2. Amount of hazardous waste produced:
a kg./mo.
b. <u>3440</u> kg./yr.
3. Types of hazardous waste produced by Hazardous Waste Number:
- FOO 2 - FOO 5
4. Are hazardous wastes transported off-site by the generator?  Yes  No
R.O. thru F. Faci
C.O. thru R.C.

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		2.1				77
					•	

				1- NON-COMPLIANCE, Z-COMPLIANCE, 3-NOT APPLICABLE, 4-NOT DETERMINED	<del>d)</del> .
C	OMP STA	TU:	5	REQUIREMENT	CHAPTER
H'	1	1	4		75.262
L	2	L		Identification number .	(c)(l)
L	2			Hazardous waste shipments offered only to licensed transporters	(ć) (4)
	-	3		Authorization received from TSD facility for wastes shipped off-site	(d)
		3		PA manifest used for intrastate shipments	(e)(l)
	2			Disposer state manifest or EPA format manifest used for out-of-state shipments	(e)(1)(:
	2			Manifests filled out properly and completely	(e)(l)
- created and control	2			Manifests routed properly and within time limits (24 hours)	(e) (2)
	12			Proper U.S. DOT shipping containers or packages	(f)(1)
	2			Shipping containers marked and labeled according to U.S. DOT	(f)(l)(i
	2			Containers of 110 gal. or less marked with required PA label	(f) (l) (i
	2			Placards offered to transporter	(f)(2)
		3		Wastes accumulated on-site for less than 90 days Sm quanty generator	(g)(l)
	2			Wastes stored in proper containers and properly marked and labeled	(g)(l)(
	2			Containers managed in accordance with 75.265(g)	(g)(1)(
1	2			Containers clearly marked with accumulation date and visible for inspection	(g)(1)(
_	2			Records retained at designated location for 20 years	(h)
L	2			Quarterly reports submitted to the Department	(i)
L		3		Exception reporting procedures followed	(j)
		3		Hazardous waste disposal plan, if required	(1)
	3		_	Spill reporting procedures followed	(m) (l)
_	2		1	Preparedness, Prevention and Contingency Plan approved and implemented	(m) (5)
_		1	4	Special requirements followed for international shipments	(0)
	2	1	4	Personal Safety Training 265(f)	(g)(1)
-		-	+		
		-	_		
		and the second	+		
		-	-		

# 'AZARDOUS WASTE INSPECTION REPORT Part C - Comments



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Company,	Installation	name Phi	lips	ECG, 7	nc.			
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rson Int	erviewed (sig	nature)	Pk	araka	_		4-7-8	
spector	(signature)	mark & E	mbec	K			1/7/86	-

# Pannsylvania Department of Environmental Resources. Sureau of Wasta Management

# Hazardous Waste Inspection Report Generators — Part A

Date of inspection $\frac{7/25/89}{\text{Name of inspector}}$ Time start	1:15
Name of inspector <u>michael Union</u>	Time finish $2:30$
dominanty, installation name Phylling F.C.	
Location 3101 Pleasant Valley B1	ed.
Identification number PAD 0043749	Thunicipality
Name of responsible official Robert Tsac  Title Plant Mar.	L a
	XC
Mailing addressN/A	
Area code and telephone numberN/A	
Name of person interviewed	
Title $N/A$	11.46
Mailing address (if different from above)	
Area code and telephone number	
1. Current waste handling method:	
treatment, storage	☐ disposal ☐ PBR
□ use, □ reuse,	□ recycle, □ reclaim
treatment, storage,	☐ disposal
_ use,	□ recycle, □ reclaim
2. Amount of hazardous waste produced:	, as rectain
a	
b k	9./ma.
3. Types of hazardous wasta graduand by the	9-171-
3. Types of hazardous waste produced by Hazardous Waste No Waste Number Destination Facility	Imber and destination facility (include location and type)
	Location and Type
2.0. thru Frank Fair	
+ m Cont. Office PA Region III	

EPA Region III Alment Office then Jeff Smat W



# Pennsylvania Department of Environmental Resources Bureau of Waste Management



#### Hazardous Waste Inspection Report Generators — Part B

Status 2 3 4			KEUUIREMENT				
×		3 4	Identification number	75.262			
+		+		(c)(1)			
+	×	-	Hazardous waste shipments offered only to licensed transporters	(c)(4)			
+	×		Authorization received from TSD facility for wastes shipped off-site	(d)			
+	X		PA manifest used for intrastate shipments	(e)(2)			
+	X		Disposer state manifest or EPA format manifest used for out-of-state shipments	(e)(3)			
-	X	41	Manifests filled out properly and completely	(e)(7)			
-	$\rightarrow$		Manifests routed properly and within time limits (7 days)	(e)(14) or (15			
_	>		Proper U.S. DOT shipping containers or packages	(f)(1)(i)			
-	X		Shipping containers marked and labeled according to U.S. DOT	(f)(1)(ii)			
	X		Containers of 110 gal. or less marked with required PA label	(f)(1)(iii)			
	X		Placards offered to transporter	(f)(2)			
	$\perp \times$		Wastes accumulated on-site for less than 90 days	(g)(1)(i)			
	$\perp \times$		Wastes stored in proper containers and properly marked and labeled	(g)(1)(ii)			
	$\times$		Containers managed in accordance with 75.265(q)(1)—(9)	(g)(1)(iii)			
	X		Containers clearly marked with accumulation date and visible for inspection	(g)(1)(iv)			
		X	Records retained at designated location for 20 years	(h)			
		X	Quarterly reports submitted to the Department	(i)			
	X		Exception reporting procedures followed	(j)			
	×		Hazardous waste disposal plan, if required	(1)			
	IX		Spill reporting procedures followed				
	X		Preparedness, Prevention and Contingency Plan and implemented	(m)(1)			
	X		Special requirements followed for international shipments	(m)(5)			
	X		On the job or classroom personnel training program [75.265(f)]	(0)			
	X		Drum accumulation area inspected & inspection logged weekly as per 75.265(q)(5)	(g)(1)(6)			
			10 maposton logged Weekly as per 75.205(q)(5)	(g)(1)(iii)			

#### Pennsylvania Department of Environmental Resources Bureau of Waste Management

# Hazardous Waste Inspection Report Comments — Part C

ate of Inspection			er <u>PAD 00437495-5</u>
omnany, Installation Name	Phillips ECC	i Inc.	
ounty	B-lair_	Municipality	Altoona
This for	cility was massic	ted as a	H.W. Denerator through
A 1986	majection revea	led Phillips	to appear to be a
Andle Busin	It hereates	and a form	53 was biled with
the Dext	to request a a	ange in s	tatus (sel attachments).
Sometim	e in 1987-88	P. Milhos A	tatus (selatiachments).
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occupied 1	n a Companio	Called Cars	l'Cable
	/ /		
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Resources, Bureau inspection are sho are indicated. Viole analyses and review	u of Waste Management, own in this report. Any vi lations may also be disco	inspecte <mark>d</mark> the above colations which were overed upon exami Notificat <mark>i</mark> on will be	of the Department of Environmental ve installation. The findings of this re uncovered during the inspection ination of the results of laboratory of forthcoming, confirming any viola-
erson Interviewed (signature)	N/A		Date
inspector (signature)	Michael B. Um	in	Date 7/25/89

ORIGINAL (Red)

PA'10: 1PA 1D1010	1413171	419151	51				1	. Data Entr	
HANDLER NAME: Phill	lips F	CGI	nc.				1	New	1
				0	,		i		-
DORESS: 3101	Losan	Diva.	HITOOR	a, a	. /6	602			-
DATE OF INITIAL EVALUATION VI THE BASIS FOR THIS REPORT:		5a. AGENCY RI EVALUATION Put code	OX:				O = ( B = ( EPA X = (	Other Contractor/ Oversignt	State
TYPE OF EVALUATION COVERED BY THIS REPORT: Select Evaluation Type and in	TROGES SINT Y	(enter only		Inspecti eview from 5):	-/-/-	5 11 12 13	= Complia = Case De = CEM Ins = CA Over	ence Sched.  ev. Inspect  spection  rsight Insp	Eval
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#### **Philips ECG**

Propertion in \$2011 - asset Veter Berrasse Actores FA Inc. \$ -- the district.

March 28, 1985

PERNA. DEPT. OF ENVIRONMENTAL RESOURCES EUREAU OF SOLID WASTE MANAGEMENT P.O. Box 2063 Harrisburg, PA 17210

The enclosed "Notification of Hazardous Waste Activity" is to inform you that we at the Philips ECG, Inc. Plant in Altoona, PA wish to make a deletion to Section VIII.

This deletion is G (Reuse, recycle, reclaim) and involves waste ethyl alcohol, classified as DOO1. In the past, we have been collecting this waste in an underground tank (3,000 gallon) and subsequently transporting it by American Products Co. to Kempton, PA for eventual recycling and reclamation.

We are no longer generating this waste and plan to eliminate the tank.

Sincerely,

Crist P. Karakantas

Project Engineer

Mark ORIGINAL (Red)

#### **PhilipsECG**

Philips ECG, Inc. 3101 Pleasant Vailey Boulevard Altoona PA 16603 (814) 943-1126

April 9, 1986

Penna. Dept. of Environmental Resources Bureau of Solid Waste Management P.O. Box 2063 Harrisburg, PA 17210

The enclosed "Notification of Hazardous Waste Activity" is to notify you that we are no longer generating 1000 kilograms per month of hazardous waste. Our monthly average for all of 1985 was 278 Kg.

Since we see no increase for 1986, we now qualify as a Small Quantity Hazardous Waste Generator.

Sincerely,

Crist P. Karakantas

Project Engineer

CC: Mark S. Embeck

4 Albert American Projet Company

m1

SECTIVED SECTIONS

Pennsylvania Department of Environmental Resources

Cof of Anson

#### BUREAU OF SOLID WASTE MANAGEMENT NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

VM-53: Rev. 3/82

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INSTALLATION MAILING ADDRESS	Zh a NG a sail i	the second			
	31			A STORE ST.	
STREET OR P. O. BOX					
3101 Pleas. Valley Blvd.,					
CITY OR TOWN				ST.	ZIP CODE
Altoona				PA	16602
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CITY OR TOWN	ST.	ZIP CODE		COUN	ITY
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V TALLATION CONTACT				-	
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NORTH AMERICAN PHILIPS					
R. TYPE OF OWNERSHIP					
(enter the appropriate letter into box)			• •		
F = FEDERAL M = NON-FEDERAL M					
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A. FIRST	1		C. THIRD		
6 7 1 (Pecity) ELECTRONIC RECEIVING TUBES	III	(specify)		`	
B. SECOND			D. FOURTH	1	
(specify)	111	(specify)	511 001111		
IL TYPE OF HAZARDOUS WASTE ACTIVITY	9.00				
A. GENERATION C. STORE E.	TRANSP	ORTATION	X G. REU		
3. TREAT		ETE ITEM IX)	G. RED	SE, RE	CYCLE, RECLAIM
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· C. RCRA (Hazardous Wastes) F. OTHE	R		/ if -1		5
1111111111111111111	11	1111	(soscify)	-	
I. TYPE OF NOTIFICATION.	Arm da 1 TT	A CAUSTING OF		-	
Mark "X" in appropriate box to indicate whether this is your installation nersi information, hazardous waste handled, or hazardous waste activity.  ONS).	on's first	notification of haz	ardous waste activit	V. Dr D	Ottification of a chance
	If you cr	10CK B, C. D. E. or	F, attach a inter e	T PYDIA	DRILLD IEEE INC.
A FIRST NOTICIONTION		0, 0, 0, 2, 2,	- attach a letter c	or expla	nation ISEE INSTRU
A. FIRST NOTIFICATION C. DELETION  B. CHANGE OF GENERAL INFORMATION D. ADDITION	OFAW	ASTE	E. DEL	ETION	DE AN ACTIVITY OF AN ACTIVITY

DESCRIPTION OF HAZARDOUS WASTES (Continued from front)	
IAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Error the four-di	git number from \$75.261(h)(2) for each listed hazardous wests
rom non-specific sources your installation handles. Use additional sheets if nace	
T	10 11 12
	car acathital even ligged bazarrious waste from specific
HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit num industrial sources your installation handles. Use additional sheets if necessary.	
13 14 15	16 17 18 18 22 23 24 24
25 26 27	28 29 30
COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Errer the fou	r-digit number from \$75,261(h)(4) for each chemical substance
your installation handles which may be a hazardous waste. Use additional sheets	if necessary.
31 32 33 33 37 38 37 39 39 31 32 33 38 37 39 39 39 39 39 39 39 39 39 39 39 39 39	34 3E
CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in	the poxes corresponding to the characteristics of non-listed
> CHARACTERISTICS OF NON—LISTED HAZARDOOS WAS LEST HELD VALUE (51)	Y
2. CORROSIVE	3. REACTIVE A. EP TOXIC
III CERTIFICATION	
I certify under penalty of law that I have personally examined and attached documents, and that based on my inquiry of those individ I believe that the submitted information is true, accurate, and consubmitting false information, including the possibility of fine and	d am familiar with the information submitted in this and a uals immediately responsible for obtaining the information policy in a ware that there are significant penalties to imprisonment.
SIGNATURE NAME and OF ROBERT N. PLANT MAN	
FOR OFFICIAL USE ONLY	

>